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FACSIMILE TRANSMITTAL COVER SHEET

DATE: 6/27/05 ATTORNEY DOCKET NUMBER: NVI 5183.1  
PTO FACSIMILE NUMBER: (703) 872-9306

PLEASE DELIVER THIS FACSIMILE TO: Vanessa L. Ford  
THIS FACSIMILE IS BEING SENT BY: John K. Roedel  
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Signature Date

Type of paper transmitted: Notice of Appeal

Applicant's Name: Charles S. Schasteen et al.

Serial No. (Control No.): 10/005,510 Examiner: V. Ford

Filing Date: 11/8/01 Art Unit: 1645 Confirmation No.: 9657

Application Title: METHODS AND COMPOSITIONS FOR THE CONTROL OF  
COCCIDIOSIS

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NVI 5183.1  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of Charles S. Schastecn et al.

Art Unit 1645

Serial No. 10/005,510

Filed November 8, 2001

Confirmation No. 9657

For METHODS AND COMPOSITIONS FOR THE CONTROL OF COCCIDIOSIS

Examiner Vanessa L. Ford

June 27, 2005.

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER**  
**TO THE BOARD OF PATENT APPEALS AND INTERFERENCES**

COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VIRGINIA 22313-1450

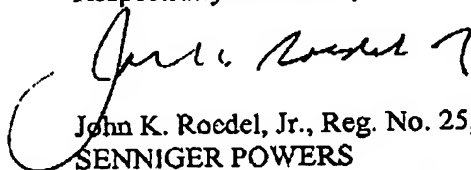
SIR:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Examiner dated December 28, 2004, rejecting the following claims: 1-30, 113-119, 136-143, and 146-152.

The appeal fee of \$ 500.00 is submitted herewith, as well as the fee of \$ 1,020.00, for a three-month extension of time under 37 CFR 1.136(a). A detailed Fee Transmittal is attached.

If there are any additional charges in this matter, please charge our Deposit Account No. 19-1345.

Respectfully submitted,



John K. Roedel, Jr., Reg. No. 25,914  
SENNIGER POWERS

One Metropolitan Square, 16th Floor  
St. Louis, Missouri 63102  
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06/28/2005 MBINAS 00000024 191345 10005510  
02 FC:1401 500.00 DA

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CENTRAL FAX CENTER

Application Number 10/005,510  
Filing Date November 8, 2001  
Inventor(s) Charles S. Schasteen et al.  
Examiner Name Vanessa L. Ford  
Attorney Docket Number NVI 5183.1

Art Unit 1845  
Confirmation No. 9657

JUN 27 2005

[ ] Applicant claims small entity status.

## METHOD OF PAYMENT

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## FEE CALCULATION

1. [ ] BASIC FILING, SEARCH AND EXAMINATION FEES  
(Type: \_\_\_\_\_) Subtotal (1) \$ \_\_\_\_\_
2. [ ] EXCESS CLAIM FEES
- Total Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_\_  
Indep Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_\_  
Multiple Dependent Claims Fee \$ \_\_\_\_\_  
(HP = highest number of claims paid for)
- Subtotal (2) \$ \_\_\_\_\_
3. [ ] APPLICATION SIZE FEE
- Total Pages \_\_\_\_ - 100 = \_\_\_\_ ÷ 50 = \_\_\_\_ x \$250 = \$ \_\_\_\_\_  
(Application + Drawings) (round up to whole #)
- Subtotal (3) \$ \_\_\_\_\_
4. [X] OTHER FEE(S)
- [X] Three month extension of time (1,020,.00)  
[ ] Information disclosure statement  
[ ] 37 CFR 1.17(q) processing fee  
[ ] Non-English specification  
[X] Notice of Appeal (500.00)  
[ ] Filing a brief in support of appeal  
[ ] Request for oral hearing  
[ ] Other: \_\_\_\_\_

06/28/2005 MBWAS \$ 0000000 191345 10005510

01 FC:1253 1020.00 DA

TOTAL AMOUNT OF PAYMENT \$ 1,520.00

*John K. Roedel, Jr.*  
John K. Roedel, Jr., Reg. No. 25,914  
Telephone: 314-231-5400

Date

JKR/cms